

## THE RELATIONSHIP BETWEEN FAMILY SUPPORT AND SUCCESS OF EXCLUSIVE BREAST MILK IN INFANTS AGED 6-12 MONTHS IN THE WORKING AREA OF PUSKESMAS SEWON II YOGYAKARTA

### *Hubungan Dukungan Keluarga Dengan Keberhasilan Pemberian ASI Eksklusif Pada Bayi Usia 6-12 Bulan di Wilayah Kerja Puskesmas Sewon II Yogyakarta*

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**Abstract:** *Breast milk (ASI) is the main natural and best food for babies, because it contains nutrients with a composition that suits the baby's needs and optimal growth and development and protects from various diseases. Exclusive breastfeeding in Indonesia is still low due to family factors that do not support exclusive breastfeeding. Family support is needed by breastfeeding mothers because mothers need attention, affection, support and health information about exclusive breastfeeding from the closest person, namely husband or family. Family support is provided in several forms, namely emotional support, informational support, instrumental support and appraisal support. This study aims to determine relationship between family support and success of exclusive breastfeeding in infants aged 6-12 months in work area of the sewon II health center. The method used observational type with cross sectional approach design, the number of respondents 163 who had infants aged 6-12 months met the inclusion and exclusion criteria. Total sampling techniques and bivariate data analysis using statistical test and Chi-Square test. The results of the analysis showed that family support with the success of exclusive breastfeeding was mostly good at 89.6% and the success of exclusive breastfeeding at 65.6%. There was a significant relationship between family support and the success of exclusive breastfeeding with significant value ( $p = 0,025 < 0,05$ ).*

**Key word:** Exclusive Breastfeeding, Family Support, Husband Support

## 1. INTRODUCTION

Breast milk (ASI) is the main, natural and best food for babies, because breast milk contains almost all nutrients with a composition that suits the needs and growth and development of babies optimally and protects babies from various diseases. According to the *World Health Organization (WHO)* 2013 exclusive breastfeeding lasts for 6 months, but after exclusive breastfeeding is complete, children need additional types of food and drinks, but breastfeeding is still continued until children are 2 years old. However, the coverage of exclusive breastfeeding in Indonesia is still low, family factors that do not support exclusive breastfeeding (1). Family support is needed by mothers in caring for babies. The support needed by the mother can be from the husband, parents, in-laws, relatives or other families, if the family is not supportive it can affect the attitude and behavior of the mother (2). The global problem of exclusive breastfeeding is not only in Indonesia, according to the *World Health Organization (WHO)* and *UNICEF* in 2018, the rate of exclusive breastfeeding is quite low at 41% (3). In Indonesia according to Basic Research (RISKESDAS) in 2018, the prevalence rate of exclusive breastfeeding is 37.3% (4).

Based on data from the Indonesian Health Profile for the last 3 years in the DI Yogyakarta area in 2019, the achievement of exclusive breastfeeding was at 77.50% (5). Based on the performance report of the Indonesian Ministry of Health in 2021, it shows that the Special Region of Yogyakarta is in 2nd place with a percentage of exclusive breastfeeding coverage of 80.7% (6). Based on data from the Bantul Health Office, exclusive breastfeeding in Bantul Regency in 2021 reached 80%, but it was lower than in 2020, which was 82% (7). The Working Area of Sewon II Health Center is one of the sub-districts in the Bantul Regency area. In 2015 the coverage of exclusive breastfeeding in the working area of Sewon II Health Center was 68.2% then decreased in 2016 to 51.72% (8). Based on data from Bantul's Health profile in 2022, in 2021 the exclusive breastfeeding coverage in the Sewon II region was 65.7%. Although this has reached the national target of 45% (6), meanwhile, based on sub-districts that have high success, exclusive breastfeeding in Bantul Regency is reported to be in Imogiri II sub-district area at 92%, while the lowest is in Kretek sub-district at 70.8% and Sewon II sub-district at 65.7%. The Sewon II region occupies the lowest coverage area of exclusive breastfeeding. These results show that the percentage of success of exclusive breastfeeding in the Sewon II sub-district area has not reached the national target.

Based on regulations, the Ministry of Health (Kemenkes) has determined that the national target of exclusive breastfeeding coverage is said to be successful if it is 80%. So that the scope of success in Sewon II District in 2021 has not met the national target. The low coverage of exclusive breastfeeding is caused by several influencing factors and one of them is the mother's education and knowledge factors while other factors that affect the success of exclusive breastfeeding are husband support, family support, economy, work, socio-cultural role of health workers and many reasons for mothers not loving the baby including insufficient milk production and low level of understanding of mothers about the importance of exclusive breastfeeding (9). The family is a buffer that always functions as a support, increasing the capacity and potential of family members. Of course, it will be more happy and enthusiastic if there are supporters (10). For a mother who has a baby and is in a situation where breastfeeding requires attention, affection, support and health information about breastfeeding from the closest person, namely her husband or family, this is a form of social support (10). Social assistance is needed by breastfeeding mothers, to secure or provide something to overcome the problems of pregnant or lactating women. The good effect felt by both respondents was that breast milk became smoother, more enthusiastic. In giving breast milk, feel comfortable and the burden faced is reduced. This is where the role of a husband is, which is to ensure the wife is not exhausted, creating a positive atmosphere that essentially the wife feels comfortable, safe, and not stressed (10).

## **2. METHODS**

This study using the type of *observational* research is research that is carried out without intervening with the research subject (11). With the research design using a cross sectional approach, data collection in a study conducted in a certain time (point time) to study the relationship between risk factors (independent) and consequences (dependent) and each research subject only carried out one data collection (observation). This study was conducted to determine the relationship between the independent variable, namely family support of breastfeeding mothers with the *dependent* variable, namely *the* success of exclusive breastfeeding. The sampling technique in research uses a sampling technique *Non probability sampling*, namely the

*total* sampling method is a *sampling* technique where all members of the population are sampled all. The population in this study was mothers who had babies aged 6-12 months in the working area of the Sewon II Health Center. Data analysis using statistical tests and *Chi-square tests*. Data were collected in this study using questionnaires on family support.

### 3. RESULTS

#### Characteristics of Respondents

**Table 1. Results of Characteristic Data Based on Maternal Age July 2023 at Sewon II Health Center Working Area**

Category	f	(%)
<31 years	52	31,9
31-40 years	39	23,9
>40 years	72	44,2
<b>Total</b>	<b>163</b>	<b>100</b>

Based on the table, it can be seen that the characteristics of respondents based on the age of respondents, most respondents belong to the >40 years category, which is 72 respondents (44,2%).

**Table 2. Results of Characteristic Data Based on education level July 2023 at Sewon II Health Center Working Area**

Category	f	(%)
Primary School	2	1,2
Junior High School	27	16,6
Senior High School	92	56,4
College	42	25,8
<b>Total</b>	<b>163</b>	<b>100</b>

Based on the table, it can be seen that the characteristics of respondents based on respondents' education, most respondents have a high school education, which is as many as 92 respondents (56,4%).

**Table 3. Results of Characteristic Data Based on July 2023 Work in Sewon II Health Center Working Area**

Category	f	(%)
Housewife	126	77,3
Self Employed	8	4,9
Employee	20	12,3
Civil Servants	3	1,8
Other	6	3,7
<b>Total</b>	<b>163</b>	<b>100</b>

Based on the table, it can be seen that the characteristics of respondents based on respondents' occupations, most respondents have jobs as IRT, which is as many as 126 respondents (77,3%).

**Table 4. Results of Characteristic Data Based on the Number of Children in July 2023 in the Working Area of Sewon II Health Center**

Category	f	(%)
1-2 Children	131	80,4
>2 Children	32	19,6
<b>Total</b>	<b>163</b>	<b>100</b>

Based on the table, it can be seen that the characteristics of respondents based on the number of respondents' children, most respondents have 1-2 children, namely as many as 131 respondents (80,4%).

**Table 5. Results of July 2023 Exclusive Breastfeeding Data in Sewon II Health Center Working Area**

Category	f	(%)
Not Exclusive Breastfeeding	56	34,4
Exclusive Breastfeeding	107	65,6
<b>Total</b>	<b>163</b>	<b>100</b>

Based on Table 4.5, it can be seen that respondents gave exclusive breastfeeding as many as 107 mothers (65,6%) and those who did not provide exclusive breastfeeding were 56 mothers (34,4%).

**Table 6. Data on July 2023 Family Support Results in the Working Area of Sewon II Health Center**

Category	f	(%)
Good	146	89,6
Not Good	17	10,4
<b>Total</b>	<b>163</b>	<b>100</b>

Based on the table, it can be seen that the characteristics of respondents based on family support, most of whom are respondents are included in the good category, namely as many as 146 respondents (89,6%).

**Table 7. The Relationship between Maternal Family Support and Exclusive Breastfeeding in the Working Area of Sewon II Health Center**

Family Support	Exclusive Breastfeeding						p
	Not		Yes		Total		
	f	%	f	%	f	%	
Good	46	28,2	100	61,3	146	89,6	0,025
Not Good	10	6,1	7	4,3	17	10,4	
<b>Total</b>	<b>56</b>	<b>34,4</b>	<b>107</b>	<b>65,6</b>	<b>163</b>	<b>100</b>	

The results of the analysis showed a relationship between family support and exclusive breastfeeding, it was found that mothers who provided exclusive

breastfeeding received family support, namely as many as 100 respondents (61,3%). Mothers who did not provide exclusive breastfeeding who received poor family support were 10 respondents (6,1%). The results of statistical tests were obtained ( $p = 0,025 < 0,05$ ) which means that it can be concluded that there is a relationship between family support and exclusive breastfeeding.

## **4. DISCUSSION**

### **Exclusive breastfeeding**

The results of research on the relationship between family support and the success of exclusive breastfeeding for infants aged 6-12 months in the Sewon II Health Center work area were mostly classified as good category, namely 89.6%. The success of exclusive breastfeeding is 65.6%. This illustrates that most mothers are late in giving exclusive breastfeeding to their children. With the results of this study, it was found that exclusive breastfeeding in Sewon II District in 2023 decreased by 0.1% with a percentage of 65.6% smaller than in 2021, which was 65.7% (7). Breast milk is the main source of nutrition for babies, so it does not need other additional foods because the nutrients needed have been fulfilled from breast milk to ensure growth and development for up to 6 months. In addition, babies less than 6 months have not fulfilled perfect digestive enzymes, as a result of which food cannot be digested properly. Breast milk can increase the baby's immune system, breastfeeding is useful for increasing intelligence and can strengthen the bond of affection between mother and child.

Based on the level of education and employment, respondents have secondary education with a percentage of 56.4% who have higher education of 25.8% and low education of 1.2% of respondents. The higher the education, the easier it is to find information related to breastfeeding. This is reinforced by the opinion of Notoadmodjo (2010) who explains that education is related to transmission, knowledge, attitudes, beliefs, skills and other aspects of behavior. Higher education will affect a person's mindset to act and make the best decisions so that maturity and ability to receive information from others emerge (12). Based on respondents' occupations, most of them are housewives (IRT), namely as many as 126 respondents (77.3%) mothers who do not work are most likely to provide exclusive breastfeeding because of more time at home to take care of children and household needs. This is reinforced by research by Juliastuti (2011) which explains that exclusive breastfeeding is given more to mothers who do not work because mothers who do not work only carry out their functions as housewives and spend a lot of time at home without being tied to work outside the home so that they can provide breast milk optimally without being limited by time and busyness (13).

### **Family Support Relationship for Exclusive Breastfeeding in Sewon II Health Center Working Area**

In this study, the relationship between family support and exclusive breastfeeding found that mothers who provided exclusive breastfeeding received family support, namely as many as 100 respondents (61.3%). The results of statistical tests were obtained ( $p = 0.025 < 0.05$ ) which means that it can be concluded that there is a relationship between family support and exclusive breastfeeding. Friedman (2020) suggests that family support can be provided in several forms, namely informational support, reward support, instrumental support, and emotional support (14). Rambu

(2019) where research shows that 65% of mothers who have babies do not get good family support. According to researchers, the amount of poor family support is caused by the lack of knowledge of parents and husbands about the importance of exclusive breastfeeding, in addition to the habit of the community to give food or drinks early such as giving honey, young coconut, mushy rice and formula milk to babies before the baby is 6 months old (15), Many families suggest giving food or milk if the mother is busy unable to provide breast milk and also considered the mother's milk insufficient (16)

## **5. CONCLUSION**

There is a relationship between family support and the success of exclusive breastfeeding for infants aged 6-12 months in the Working Area of Sewon II Health Center Yogyakarta, with correlation test results with significant values ( $p = 0.025 < 0.05$ ). So it can be concluded that the better the family support, the more awareness of mothers in providing exclusive breastfeeding. Mothers provide exclusive breastfeeding of 65.6%. The age characteristics of mothers <31 years with a percentage of 31.9% and >40 years (44.2%), secondary education as many as 92 respondents, 56.4% and non-working status or housewives as many as 126 (77.3%) and the number of children more than one as many as 131 (80.4%). Families need to provide support to mothers who are breastfeeding exclusively because lack of family support from parents or husbands can lead to failure in providing exclusive breastfeeding. The family is the closest person who can influence the mother in providing emotional, informational, instrumental and appraisal support so the better the support provided by the mother's family will reduce the stress felt when breastfeeding, when the mother gets family support it is expected that the hormone oxytocin increases so that breast milk becomes smooth and the greater the mother's awareness in providing exclusive breastfeeding.

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